							Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO									3/8/	0180	•	
CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY TYPE			کر	OTHER THAN		
TOTAL CLAIMS		12-					TE	FEE	٦٦	BATE	FEE	
FOR .		NUMBE	NUMBER FILED		NUMBER EXTRA		FEE	┿┷	OF		+	
TOTAL CHARGEABLE CLAIMS		12n	12 minus 20=		•		9=		OF	You		
INDEPENDENT	V	/minus 3 =		•		 3=	1	OR	Yes	 		
MULTIPLE DEP	PRESENT				+14	 		7		 		
• If the different	ce in column 1 is	s less than :	less than zero, enter "0" in column 2			TOT			OR	L	me	
1/4/85 CLAIMS AS AMENDED - PART II								L	ال		THAN	
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST						SMA	LL	ENTITY	OR		ENTITY	
ENT A	REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER	PRESENT EXTRA	RAT	Ε	ADDI- TIONAL FEE	-	RATE	ADDI- TIONAI FEE	
Total Independent	- 14	Minus	-20)	= (X\$ 9	<u>-</u>	1	OR	/X\$18=		
Independent	1.2	Minus	1-3		=	X43			OR	X86=	· ,	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							\exists			+290=		
				•		+145	_1		OR	TOTAL		
	(Column 1)		(Calcum		(Caluma 0)	ADDIT, F			OR	ADDIT. FEE	<u> </u>	
, .	CLAIMS		(Colum	ST	(Column 3)		_	ADDI-	7 1		ADDI	
Total Independent	REMAINING AFTER AMENDMENT		PREVIOU PAID F	JSLY	PRESENT EXTRA	RATE		TIONAL FEE		RATE	ADDI- TIONAL FEE	
Total	•	Minus	**	•	=	X\$ 9:	- [OR	X\$18=	·	
Independent	NTATION OF MI	Minus	SENDENT (N A114	-	X43=		•	OR	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+290=		
						TOTA		· . ·	OR .	TOTAL ADDIT, FEE		
	(Column 1)		(Column	T2)	(Column 3)	20011. F		•	• .	WDII. PEEL		
Total Independent	CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	ST A SLY	PRESENT EXTRA	RATE		ADDI- IONAL		RATE	ADDI- TIONAL	
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Independent	•	Minus .	***		=	X43=	╁		OR			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+		OR	X86=		
If the entry in column 1 is loss than the cate is action a									OR	+290=	· .	
If the entry in column 1 is tess than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is tess than 20, enter "20." If the "Highest Number Previously Paid For" IN THIS SPACE is tess than 3, enter "3."							E	· .	OR A	TOTAL		
The *Highest Num	ber Previously Paid	For (Total or	o opace is to Independent	is the l	is, enter "3." highest number (ound in the a	rbbro	priate box		mn 1.		